FULL BOARD OF DIRECTORS MEETINGS
April 26, 2018 at 1:00 p.m.
Gulf Coast Medical Center – Boardroom (Medical Office Building)
13685 Doctors Way, Ft. Myers, FL 33912

1. CALL TO ORDER (Stephen Brown, M.D., Board Chairman)
   Lee Memorial Health System Board of Directors, sitting as the Board of Directors for Lee Health, Gulf Coast Medical Center & Lee Memorial Hospital/HealthPark Medical Center and the Board of Directors of its subsidiary corporations, including but not limited to Cape Memorial Hospital, Inc. doing business as Cape Coral Hospital; Lee Memorial Home Health, Inc.; and HealthPark Care Center, Inc.

2. INVOCATION & PLEDGE OF ALLEGIANCE
   (Rabbi Dr. Michael Schorin, MAPC, BCC)

3. PUBLIC INPUT – Agenda Items: Any Public Input is limited to three minutes and a “Request to Address the Board of Directors” card must be completed and submitted to the Board Staff prior to meeting. Individuals wishing to address the Board on a Non Agenda item must notify the Board Staff of the subject matter at least three (3) days prior to the meeting.

4. RECOGNITION
   1. Maria Morello, ARRT, ARDMS – 28 years (Lori Thies, Director Radiology)

5. PRESIDENT’S REPORT
   (Larry Antonucci, M.D., President & CEO)

6. BOARD OF DIRECTORS REPORTS

7. CHAIRMAN’S UPDATE
   (Stephen Brown, M.D., Board Chairman)
   1. Future discussion/presentation topics

8. CONSENT AGENDA (Approve)
   1. Quality, Safety & Education and Full Board Meeting Minutes of 4/12/18
   2. Board of Directors Department Financials YTD 03/31/18
   3. Revision to the Medical Staff General Rules & Regulations of Gulf Coast Medical Center, HealthPark Medical Center, Cape Coral Hospital, Golisano Children’s Hospital of Southwest Florida and Lee Memorial Hospital – Rule # 9 Medical Records and Physician Orders, and Rule # 11 Surgical Services

9. MEDICAL STAFF RECOMMENDATIONS (Approve)
   1. Lee Memorial Hospital
   2. Cape Coral Hospital
   3. Gulf Coast Medical Center
   4. HealthPark Medical Center
   5. Golisano Children’s Hospital of SWFL
AGENDA (Page 2 of 2)

FULL BOARD OF DIRECTORS MEETINGS
April 26, 2018 at 1:00 p.m.

10. OLD BUSINESS
   1. Amendment to CEO’s Employment Agreement  (Approve)

11. NEW BUSINESS

12. BOARD MEETING CRITIQUE

Date of the next Meeting:
   May 3, 2018 at 1:00 p.m.
   Quality, Safety and Education Workshop
   Gulf Coast Medical Center – Boardroom
   13685 Doctors Way, Ft. Myers, FL 33912

ADJOURN  (Stephen Brown, M.D., Board Chairman)
BOARD OF DIRECTORS

Invocation
&
Pledge of Allegiance

Lee Memorial Health System Board of Directors
BOARD OF DIRECTORS

PUBLIC INPUT

AGENDA ITEMS:

Any public input pertaining to items on the Agenda is limited to three minutes and a “Request to Address the Board of Directors” card should be completed and submitted to the Board Staff prior to meeting.

Refer to Board Policy: 10:15H: Public Addressing the Board

Non-Agenda Item:

Individuals wishing to address the Board on an item NOT on the Agenda, the Board office must be notified of subject matter at least three (3) days prior to the meeting to allow staff time to prepare and to insure the matter is within the jurisdiction of the Board.
BOARD OF DIRECTORS

Recognitions

Maria Morello, ARRT, ARDMS – 28 years
Proclamation

LEE MEMORIAL HEALTH SYSTEM

BOARD OF DIRECTORS

would like to recognize with sincere appreciation

Maria Morello, ARRT, ARDMS

in her retirement of 28 dedicated service years
to Lee Health.
The entire system wishes you health & happiness,
and all the best in your future endeavors.

BOARD OF DIRECTORS
District 1 – Stephen R. Brown, MD • Therese Everly, BS, RRT
District 2 – Donna Clarke • Nancy M. McGovern, RN, MSM
District 3 – Sanford N. Cohen, MD • David F. Collins
District 4 – Diane Champion • Chris Hansen
District 5 – Jessica Carter Peer • Stephanie L. Meyer, BSN, RN
BOARD OF DIRECTORS

PRESIDENT’S REPORT

Larry Antonucci, MD, President & CEO
Lee Health
Board of Directors Meeting
April 26, 2018

President’s Report

- Safety Net Board Meeting
- Cohen Family Garden
- Anthem challenge
- Cobalt
- System Leadership Council feedback
- Healthcare at the crossroad
- Why does US Healthcare cost so much?
BOARD OF DIRECTORS

CHAIRMAN’S UPDATE

Stephen Brown, MD, Board Chairman
1. Quality, Safety & Education Board & Full Board Meeting Minutes 4/12/18
2. Board of Directors Department Financials YTD 03/31/18
3. Revision to the Medical Staff General Rules & Regulations of Gulf Coast Medical Center, HealthPark Medical Center, Cape Coral Hospital, Golisano Children’s Hospital of Southwest Florida, and Lee Memorial Hospital – Rule #9 Medical Records and Physician Orders, and Rule #11 Surgical Services
FULL BOARD OF DIRECTORS MEETING MINUTES
Thursday, April 12, 2018

LOCATION: Gulf Coast Medical Center, Medical Office Building, Board of Directors Boardroom, 13685 Doctors Way, Fort Myers, FL 33912

MEMBERS PRESENT: Stephen Brown, M.D., Board Chairman; Donna Clarke, Board Vice Chairman; David Collins, Board Treasurer; Therese Everly, Board Secretary; Sanford N. Cohen, M.D., Board Member; Chris Hansen, Board Member; Jessica Carter Peer, Board Member; Stephanie Meyer, BSN, RN, Board Member; Nancy McGovern, RN, MSM, Board Member; Diane Champion, Board Member

MEMBERS ABSENT:

NOTE: Documents referred to in these minutes are on file by reference to this meeting date in the Office of the Board of Directors and on the Board of Directors website at www.leehealth.org/boardofdirectors, for public inspection.

<table>
<thead>
<tr>
<th>SUBJECT</th>
<th>DISCUSSION</th>
<th>ACTION</th>
<th>FOLLOW-UP</th>
</tr>
</thead>
<tbody>
<tr>
<td>MEETING CALLED TO ORDER</td>
<td></td>
<td>FULL BOARD OF DIRECTORS MEETING was CALLED TO ORDER at 12:59 p.m.</td>
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<td></td>
<td></td>
<td>by Stephen Brown, M.D., Board Chairman.</td>
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<tr>
<td>INVOCATION AND PLEDGE OF</td>
<td>Board Member Chris Hansen gave the Invocation, followed by the Pledge of</td>
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<td>ALLEGIANCE</td>
<td>Allegiance.</td>
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<tr>
<td>PUBLIC INPUT</td>
<td>None at this time.</td>
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<tr>
<td>RECOGNITION</td>
<td>Andrea Jones, BSN, PCCN – 25 years</td>
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<td></td>
<td>(Dr. Eric Applegren, ACMO &amp; Rebecca Eliassen, Nursing Director)</td>
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<tr>
<td>PHYSICIAN LEADERSHIP COUNCIL</td>
<td>William Hearm, D.O., PLC Chairman</td>
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<td>REPORT</td>
<td>Brief discussion ensued regarding data transparency and patient experience.</td>
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<td></td>
<td>Jessica Carter Peer arrived at 1:17. Chris Hansen did not vote, out of the</td>
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<td></td>
<td>room.</td>
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<tr>
<td>PRESIDENT’S REPORT</td>
<td>Larry Antonucci, M.D., President &amp; CEO presented the President’s Report.</td>
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<td></td>
<td>Board Chair requested the HR Board Liaison be part of the CHRO search.</td>
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<td>BOARD OF DIRECTORS REPORTS</td>
<td>Jessica Carter Peer – Attended Leadership Rounds at GCMC.</td>
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<td>Diane Champion – Commitment to Excellence award nomination period starts on</td>
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<td>May 1st. Diane thanked everyone that attended the Auxiliary luncheon.</td>
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<td>Stephanie Meyers – Attended Risk Management liaison meeting.</td>
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<td>Donna Clarke – Attended Long Service Award Banquet and Auxiliary Luncheon</td>
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<td></td>
<td>very proud and humbling to see the longevity of staff. Attended leadership</td>
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<td></td>
<td>rounds at LMH.</td>
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<td>Therese Everly – Attended Senator Benacquisto legislative luncheon.</td>
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<td></td>
<td>Attended leadership rounds at Cape Coral Hospital. Attended the Golden Apple</td>
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<td>award where Jon Cecil was recognized for his years of service to Lee County</td>
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<td>School District and spoke on juvenile mental health. Reported on the LPG</td>
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<td>postpartum depression screening.</td>
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<td></td>
<td>Nancy McGovern – Attended the Long Service Award Event and met with John</td>
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<td></td>
<td>Chomeau regarding the ACO’s.</td>
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<td>Chris Hansen – Attended 2 of the 3 Tiger Team workshops on anxiety and</td>
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<tr>
<td></td>
<td>trauma.</td>
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<td></td>
<td>Attended Tiger Bay Club meeting Sheriff Scott presented on school safety.</td>
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<td></td>
<td>Attended Lee Home Health strategy meeting. Invited the board to the 1st</td>
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<tr>
<td>SUBJECT</td>
<td>DISCUSSION</td>
<td>ACTION</td>
<td>FOLLOW-UP</td>
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<td>annual NAMI walk September 29th. Sanford Cohen – Attended the MEC meeting at GCMC.</td>
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</tbody>
</table>
| CHAIRMAN’S UPDATE | • Cost of a CAT scan – Discussion surrounding a recent article comparing the price of an emergency room CAT scan.  
• Active Shooter – Discussion on physical security. Therese Everly working with David LaRosa on a board update.  
• Community member appointments to the Board – Discussion on various community members and openings. Therese may have an interested party.  
• Steve Brown thanked Mary McGillicuddy and Clarence Cooper for their help in resolving an issue with a young physician.  
• Skip Leonard presented an update on recent Lee Health foundation events - Shipley event, Sand Cap fund raiser, Golisano’s Children’s Hospital | | Therese Everly/TBD |
| RECESS Called at 2:19 pm. CONVENED at 2:31 p.m. | | | |
| CHAIRMAN TO QUALITY & SAFETY LIAISON | Therese Everly requested board members send agenda item suggestions for upcoming Quality & Safety workshop to Scott Nygaard. | The gavel was turned over to QUALITY & SAFETY Liaison, Therese Everly, to CONVENE the QUALITY & SAFETY portion of the meeting at 2:32 p.m. | |
| QUALITY, SAFETY & EDUCATION | Scott Nygaard, MD, Chief Operating Officer  
1. Patient Safety Indicators (FSI) – Marilyn Kole, MD  
Discussion followed  
2. Patient Experience –Becky Pollins, Dr. Phyllis Neef and Regina Eberwein  
Discussion ensued on various processes on implementing the culture change and patient survey.  
3. Readmits – Dr. Kolson,  
Discussion ensued regarding Complex Care Center - Interim care for complex patients  
4. Skilled Nursing Facility – Troy Churchill  
5. Rehabilitation Hospital – Jeff Brown  
Discussion about Volunteer utilization, readmissions and benchmarking  
6. Home Health – TJ Pennsy  
7. Ambulatory Patient Safety – Diane Smith  
Discussion followed.  
8. Performance Improvement Indicators – Alex Daneshmand MD  
Discussion followed. | | |
<p>| David Collins left at 4:32 pm. Nancy McGovern left at 4:37 pm | | | |
| QUALITY &amp; SAFETY LIAISON TO CHAIRMAN | The gavel was turned over to the Board Chairman, Stephen Brown, M.D., to RECONVENE the FULL BOARD portion of the meeting at 5:08 p.m. | | |
| CONSENT AGENDA | Dr. Brown asked for approval of the Consent Agenda. | A motion was made by Donna Clarke to approve the Consent Agenda consisting of: | |
| | 1. Finance Board &amp; Full Board Meeting Minutes of 3/22/18 | | |</p>
<table>
<thead>
<tr>
<th>SUBJECT</th>
<th>DISCUSSION</th>
</tr>
</thead>
<tbody>
<tr>
<td>OLD BUSINESS</td>
<td>Ethics Training – Therese Everly informed the Board she had a discussion with Jim Humphrey regarding Ethics training. He has agreed to give an ethics training review to the board at a future meeting. Board critique – Therese was asked to review the old board critique form; she would like to have a copy of the old model to blend the two. Genny to review January 2011 records for old Board critique form. Cultural Transformation advances – Dr. Cohen commented on Becky Pollins' and Phyllis Neef’s work and dedication into cultural transformation. Their work has made a huge difference, especially with medical staff and Dyads.</td>
</tr>
<tr>
<td>NEW BUSINESS</td>
<td>None at this time.</td>
</tr>
<tr>
<td>BOARD MEETING CRITIQUE</td>
<td>Very informative, great questions and discussion,</td>
</tr>
<tr>
<td>NEXT REGULAR MEETING</td>
<td>The next LEE HEALTH BOARD OF DIRECTORS WORKSHOP will be held on May 3, 2018, at 1:00 p.m. in the Gulf Coast Medical Center, Medical Office Building, Boardroom 13685 Doctors Way, Fort Myers, FL 33912</td>
</tr>
<tr>
<td>ADJOURNMENT</td>
<td>The LEE HEALTH SYSTEM FULL BOARD OF DIRECTORS MEETINGS ADJOURNED at 5:18 p.m. by Stephen Brown, M.D., Board Chairman.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ACTION</th>
<th>FOLLOW-UP</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. LMHS Utilization Management Plan 2018 3. Conditions of participation Home Health – Pre-Designated Administrator Approval The motion was seconded by Chris Hansen and carried with no opposition.</td>
<td>Jim Humphrey-6/28/18 Genny White/TBD</td>
</tr>
</tbody>
</table>

Minutes were recorded by Eddie Sambrato, Assistant to the Board of Directors.

Therese Everly
Board Secretary

Lee Memorial Health System Board of Directors
<table>
<thead>
<tr>
<th>Expenses</th>
<th>2018 YTD to 3/31/18</th>
<th>2018 Actual</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Salary</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Productive Salary</td>
<td>83,159</td>
<td>36,380</td>
</tr>
<tr>
<td>NonProductive Salary (Board Stipend, Doc Coggins Award monies, Benefits, PTO)</td>
<td>172,242</td>
<td>78,061</td>
</tr>
<tr>
<td><strong>Total Salaries</strong></td>
<td>255,401</td>
<td>114,441</td>
</tr>
<tr>
<td><strong>Supplies (Variable)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>839000 Small Item Equip/Projects (iPads)</td>
<td>219</td>
<td>0</td>
</tr>
<tr>
<td>840000 Office/Copy/Photo/Computer</td>
<td>2,206</td>
<td>885</td>
</tr>
<tr>
<td>841000 Gift Shop/Uniform Store Merchandise</td>
<td></td>
<td></td>
</tr>
<tr>
<td>843000 Education Supplies/Books</td>
<td></td>
<td></td>
</tr>
<tr>
<td>850000 Raw Food Costs</td>
<td>720</td>
<td>1,281</td>
</tr>
<tr>
<td><strong>Total Supplies (Variable)</strong></td>
<td>3,145</td>
<td>2,166</td>
</tr>
<tr>
<td><strong>Other (Fixed)</strong></td>
<td></td>
<td></td>
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<tr>
<td>822000 Legal Expense - Non Professional</td>
<td></td>
<td></td>
</tr>
<tr>
<td>825000 Legal Expense - Professional Liability - Atty Fees</td>
<td>100,000</td>
<td>21,194</td>
</tr>
<tr>
<td>745000 Employee Recognition</td>
<td></td>
<td></td>
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<tr>
<td>843000 Adm/mtk-other</td>
<td></td>
<td></td>
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<tr>
<td>859000 SPECIAL EVENTS - Doc Coggins; Holiday Party</td>
<td>25,000</td>
<td>18,645</td>
</tr>
<tr>
<td>859000 Other Expenses (General expenses other than office supplies)</td>
<td>95</td>
<td></td>
</tr>
<tr>
<td>863000 Dues &amp; Memberships</td>
<td>10,000</td>
<td>445</td>
</tr>
<tr>
<td>864000 Subscriptions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>865000 Scholarships/Donations</td>
<td>3,000</td>
<td>2,435</td>
</tr>
<tr>
<td>888000 Telephone &amp; Suncom (iPads 3G)</td>
<td>1,200</td>
<td>355</td>
</tr>
<tr>
<td>888100 Cellular Phone</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>880000 Travel &amp; Education</td>
<td>50,000</td>
<td>15,028</td>
</tr>
<tr>
<td>880100 Mileage Reimbursement</td>
<td>5,044</td>
<td>462</td>
</tr>
<tr>
<td>881200 Business Meetings &amp; Expense</td>
<td>5,000</td>
<td>2,950</td>
</tr>
<tr>
<td>960000 Postage Expense</td>
<td>50</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total Other (Fixed)</strong></td>
<td>199,294</td>
<td>61,609</td>
</tr>
<tr>
<td><strong>Purchased Services (Fixed)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>845300 Purchased Svc - Contract Svcs</td>
<td>35,000</td>
<td>355</td>
</tr>
<tr>
<td>845314 Purchased Svc - Culinary Solutions</td>
<td>8,000</td>
<td>1,944</td>
</tr>
<tr>
<td>845700 Purchased Svc - Printing</td>
<td>2,000</td>
<td>1,070</td>
</tr>
<tr>
<td><strong>Total Purchased Services (Fixed)</strong></td>
<td>45,000</td>
<td>3,369</td>
</tr>
</tbody>
</table>

* TOTAL EXPENSES: 502,840 | 181,585 | 0
DATE: 4/18/2018  

LEGAL SERVICE REVIEW? YES X NO

SUBJECT: **Revisions to the Medical Staff General Rules & Regulations – Rule #9 – Entitled Medical Records and Physician Orders**

REQUESTOR & TITLE: Olga Ruiz, Director, Medical Staff Administrative Services

**PREVIOUS BOARD ACTION ON THIS ITEM (IF ANY)**
(justification and/or background for recommendations – internal groups which support the recommendation)

The Medical Staff General Rules and Regulations have been amended from time to time. The Board of Directors last adopted revisions to the General Rules and Regulations as recommended by the Medical Staff on April 12, 2012.

**SPECIFIC PROPOSED MOTION:**

Motion to adopt the recommended revision to Rule #9 entitled Medical Records and Physician Orders; subsections (b) History and Physical Examination, and (e) Operative Report of the Medical Staff General Rules & Regulations for Cape Coral Hospital, Gulf Coast Medical Center, Lee Memorial Hospital, HealthPark Medical Center, and Golisano Children’s Hospital of Southwest Florida as presented.

**FINANCIAL IMPLICATIONS**
Budgeted Account _____ Non-Budgeted ____

N/A

**STAFFING & OPERATIONAL IMPLICATIONS**
(including FTEs, facility needs, etc.)

N/A

**SUMMARY**
(including alternatives considered, Pros and Cons)

The Medical Executive Committees and the Medical Staffs for Cape Coral Hospital, Gulf Coast Medical Center, Lee Memorial Hospital, HealthPark Medical Center and the Golisano Children’s Hospital of Southwest Florida approved the revisions to their respective Medical Staff General Rules and Regulations relating to History and Physical Examination and Operative Report in compliance with regulatory and accreditation requirements.
9. Medical Records

b. History and Physical Examination

i. A physical examination and medical history shall be completed no more than 30 days before or 24 hours after an admission or registration, but prior to surgery, or a procedure requiring anesthesia services, any high risk procedures, and other procedures requiring an H&P. This examination must be placed within the patient’s medical record within 24 hours of admission or registration, or prior to surgery, or a procedure requiring anesthesia services, any high risk procedures, and other procedures requiring an H&P, whichever comes first. The history and physical must be in the medical record prior to any high-risk procedure.

In addition, an updated medical record entry documenting an examination for any changes in the patient’s condition when the medical history and physical examination are completed within 30 days before admission is required. This updated examination must be completed and documented in the patient’s medical record within 24 hours after admission, but prior to surgery, or a procedure requiring anesthesia services, any high risk procedures, and other procedures requiring an H&P.

ii. For surgical patients, the anesthesiologist’s review of the patient’s history to identify any current updates and the physical exam which content is determined by an assessment of the patient’s condition and any co-morbidities in relation to the surgery may serve as the updated examination. The H&P update must document that the patient has been examined, the H&P reviewed, and any changes or “no change” has occurred in the patient’s condition since the H&P was completed.

iii. The physical examination shall include pertinent findings resulting from an assessment of all systems of the body and vital signs (pulse, respirations, blood pressure – blood pressure is required on all patients over six (6) years of age). An admitting diagnosis or diagnostic impression shall be included. The proposed treatment plan shall be documented. The medical evaluation and risk assessment of patients are the responsibilities of a physician, oromaxillofacial surgeon, or other practitioner qualified to perform such evaluations and assessments.

iv. When medical histories and physicals are performed by non-physicians, authentication by the responsible physician shall be in accordance with applicable law.
v. For surgical services there must be a complete history and physical work-up in the medical record of every patient prior to surgery, except in emergencies. If dictated, but not yet on the chart, there must be a statement to that effect and an admission note in the chart is necessary.

c. Progress Notes
   i. A progress note shall be written within twenty-four (24) hours of admission and immediately after surgery. Progress notes shall be recorded routinely as indicated by the condition of the patient. The final progress note should include the condition of the patient and any instructions given to the patient and/or family; unless documented elsewhere in the record.

d. Informed Consent
   i. In accordance with Florida law, it is the physician’s responsibility to obtain the expressed, informed consent of patients or their representatives when the procedure to be performed is surgical, or is invasive and involves a significant risk of adverse or injurious outcome to the patient, or when required by the prevailing professional standard of care. Informed consents must be obtained and documented in the medical record. Hospital staff or persons designated by the physician may assist with obtaining consent forms or other documentation relating to informed consent consistent with hospital policy.

e. Operative Report
   i. An operative report describing techniques, findings, and tissues removed or altered shall be dictated and signed by the surgeon immediately following surgery. The operative report will contain at least the following:
      ii. SR.1a Name and hospital identification number of the patient;
      iii. SR.1b Date and times of the surgery;
      iv. SR.1c Name(s) of the surgeon(s) and assistants or other practitioners who performed surgical tasks (even when performing those tasks under supervision);
      v. SR.1d Pre-operative and post-operative diagnosis;
      vi. SR.1e Name of the specific surgical procedure(s) performed;
      vii. SR.1f Type of anesthesia administered;
      viii. SR.1g Complications;
      ix. SR.1h A description of techniques, findings, and tissues removed or altered;
     x. SR.1i Estimated blood loss (specify N/A if no blood loss);
   xi. SR.1j Surgeons or practitioners name(s) and a description of the specific significant surgical tasks that were conducted by practitioners other than the primary surgeon/practitioner (significant surgical procedures include: opening and closing, harvesting grafts, dissecting tissue, removing tissue, implanting devices, altering tissues); and,
   xii. SR.1k Prosthetic devices, grafts, tissues, transplants, or devices implanted (if any).
The operative report shall be dictated in its entirety before the patient is transferred to the next level of care (e.g. before the patient leaves the post anesthesia care area).
DATE: 4/18/2018  
LEGAL SERVICE REVIEW? YES X  NO

SUBJECT: Revisions to the Medical Staff General Rules & Regulations – Rule #11 – Entitled Surgery Services

REQUESTOR & TITLE: Olga Ruiz, Director, Medical Staff Administrative Services

PREVIOUS BOARD ACTION ON THIS ITEM (IF ANY)  
(justification and/or background for recommendations – internal groups which support the recommendation)

The Medical Staff General Rules and Regulations have been amended from time to time. The Board of Directors last adopted revisions to the General Rules and Regulations as recommended by the Medical Staff on April 12, 2012.

SPECIFIC PROPOSED MOTION:

Motion to adopt the recommended revision to Rule #11 entitled Surgery Services; subsections (a) Anesthesia of the Medical Staff General Rules & Regulations for Cape Coral Hospital, Gulf Coast Medical Center, Lee Memorial Hospital, HealthPark Medical Center, and Golisano Children’s Hospital of Southwest Florida as presented.

FINANCIAL IMPLICATIONS  
Budgeted Account ____  Non-Budgeted ____

(Annual Project Budget and Total Project Budget)

N/A

STAFFING & OPERATIONAL IMPLICATIONS  
(including FTEs, facility needs, etc.)

N/A

SUMMARY  
(including alternatives considered, Pros and Cons)

The Medical Executive Committees and the Medical Staffs for Cape Coral Hospital, Gulf Coast Medical Center, Lee Memorial Hospital, HealthPark Medical Center and the Golisano Children’s Hospital of Southwest Florida approved the revisions to their respective Medical Staff General Rules and Regulations relating to Anesthesia in compliance with regulatory and accreditation requirements.
Rule #11 – Surgery Services

Surgery Services

a. Anesthesia

i. The anesthesiologist shall maintain a complete anesthesia record to include evidence of pre-anesthetic evaluation (within 48 hours prior to surgery/procedure and as per FM#2442 Pre-anesthesia evaluation) and post-anesthetic follow-up (within 48 hours after surgery/procedure and as per FM #0493 Post-Anesthesia evaluation) of the patient’s condition. Anesthesiologists will be available in time to evaluate their patients adequately before surgery and will be immediately available until the last patient under their supervision is discharged from the Recovery Room.
BOARD OF DIRECTORS

MEDICAL STAFF RECOMMENDATIONS

(APPROVE)

1. Lee Memorial Hospital
2. Cape Coral Hospital
3. Gulf Coast Medical Center
4. HealthPark Medical Center
5. Golisano Children’s Hospital of SWFL
MEMORANDUM

To:       Board of Directors
From:     Nancy A. Taylor, CPMSM, CPCS
          Director, Centralized Credentialing Services
Date:     April 18, 2018
Subject:  Lee Memorial Hospital Medical Staff Recommendations

The Facility Medical Executive Committee of the Medical Staff recommends the following physicians and allied health practitioners and certifies they have met the requirements set forth in the bylaws:

1. Associate Staff Appointment:
   a. Alyson Sanchious, M.D. – Family Medicine

2. Telemedicine Appointment – Privileges Only:
   a. Michel Choueiri, M.D. – Tele-Oncology
   b. Fernando Norona, M.D. – Teleneurology
   c. Theresa Sevilis, D.O. – Teleneurology

3. Reinstatement:
   a. Ovidiu Ranta, M.D. – Internal Medicine

4. Temporary Privileges:
   b. Ashwani Sethi, M.D. – Gastroenterology, 03-16-18 – 04-14-18

5. Resignations:
   a. Asif Choudhury, M.D. – Gastroenterology, effective 03-13-18
   b. Esther Morrison, M.D. – Infectious Disease, effective 04-06-18

6. Leave of Absence:
   a. Meir Daller, M.D. – Urology, return from leave effective 05-01-18
   b. Eileen de Grandis, M.D. – General & Vascular Surgery, 04-01-18 – 03-31-19
   d. Michael Tibbetts, M.D. – Ophthalmology, 03-14-18 – 03-31-19

7. Privilege Request:
   b. Arun Penukonda, M.D. – Class II Sedation

8. Change of Status:
   a. Stephen Zellner, M.D. – Infectious Disease, Honorary 06-01-18
9. First Year Completions – Active Status:
   a. Bradley Castellano, D.P.M. – Podiatry
   b. Muhammad Shahid, M.D. – Internal Medicine

10. First Year Completions – Associate Status:
    a. Jean Hage, M.D. – Infectious Disease
    b. Chelsey Scheiner, D.O. – Family Medicine

11. Allied Health Practitioners:
    a. Esma Etan, CRNA – US Anesthesia Partners
    b. Julissa Taveras, ARNP – Florida Cancer Specialists
    c. San Wong, ARNP – LPG Lee Neurosurgery

12. Allied Health Practitioners – Sponsor Change:
    a. Mary Hoke, ARNP – LPG Sleep Medicine
    b. Lisa Jaycox, ARNP – Millennium Hospitalist Group
    c. Ericka Small, ARNP - LPG College Pointe
    d. Judith Wagoner, ARNP – Employee Health
    e. Melissa Welsh, ARNP - Employee Health

13. Allied Health Practitioner – Additional Sponsor:
    a. Denise Schoonover, ARNP – Millennium Hospitalist Group

14. Allied Health Practitioners – Privilege Request:
    a. Nikki Iozzia, PA – LPG Pulmonary Associates, Central Venous Catheters
    c. Jill Jurkiewicz, ARNP – LPG Hospitalist Group, Code Blue and Order Controlled Substances

Approved by the Board of Directors – April 26, 2018

Stephen R. Brown, M.D., Chairman - Board of Directors
MEMORANDUM

To: Board of Directors
From: Nancy A. Taylor, CPMSM, CPCS
Director, Centralized Credentialing Services

Subject: Cape Coral Hospital
Medical Staff Recommendations

Date: April 18, 2018

The Facility Medical Executive Committee of the Medical Staff recommends the following physicians and allied health practitioners and certifies they have met the requirements set forth in the bylaws:

1. Associate Staff Appointment:
   a. Venkat Prasad, M.D. – Family Medicine
   b. Alyson Sanchious, M.D. – Family Medicine

2. Telemedicine Appointment – Privileges Only:
   a. Fernando Norona, M.D. – Teleneurology
   b. Theresa Sevilis, D.O. – Teleneurology

3. Reinstatement:
   a. Ovidiu Ranta, M.D. – Internal Medicine

4. Resignations:
   a. Asif Choudhury, M.D. – Gastroenterology, effective 03-13-18
   b. Esther Morrison, M.D. – Infectious Disease, effective 04-06-18

5. Leave of Absence:

6. Privilege Request:
   a. Arun Penukonda, M.D. – Class II Sedation
   b. Nick Sharma, M.D. – Refer & follow privileges

7. Change of Status:
   a. Thomas Carrasquillo, M.D. – General & Vascular Surgery, Honorary 05-14-18
   b. Stephen Zellner, M.D. – Infectious Disease, Honorary 06-01-18

8. First Year Completions – Active Status:
   a. Jean Hage, M.D. – Infectious Disease
   b. Muhammad Shahid, M.D. – Internal Medicine

9. First Year Completion – Associate Status:
   a. Bradley Castellano, D.P. M. – Podiatry

Lee Memorial Health System Board of Directors
10. **Allied Health Practitioners:**
   a. Esma Etan, CRNA – US Anesthesia Partners
   b. Alex Lagodzinski, ARNP – LPG Prenal Transplant
   c. Julissa Taveras, ARNP – Florida Cancer Specialists
   d. San Wong, ARNP – LPG Lee Neurosurgery

11. **Allied Health Practitioner – Sponsor Change:**
    a. Lisa Jaycox, ARNP – Millennium Hospitalist Group

12. **Allied Health Practitioner – Additional Sponsor:**
    a. Denise Schoonover, ARNP – Millennium Hospitalist Group

13. **Allied Health Practitioner – Privilege Request:**
    a. Nikki Iozzia, PA – LPG Pulmonary Associates, Central Venous Catheters
    c. Jill Jurkiewicz, ARNP – LPG Hospitalist Group, Code Blue and Order Controlled Substances

Approved by the Board of Directors – April 26, 2018

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Stephen R. Brown, M.D., Chairman - Board of Directors
MEMORANDUM

To: Board of Directors
From: Nancy A. Taylor, CPMSM, CPCS
     Director, Centralized Credentialing Services
Subject: Gulf Coast Medical Center
         Medical Staff Recommendations
Date: April 18, 2018

The Facility Medical Executive Committee of the Medical Staff recommends the following physicians and allied health practitioners and certifies they have met the requirements set forth in the bylaws:

1. Associate Staff Appointment:
   a. Alyson Sanchious, M.D. – Family Medicine

2. Telemedicine Appointment – Privileges Only:
   a. Fernando Norona, M.D. – Teleneurology
   b. Theresa Sevilis, D.O. - Teleneurology

3. Resignations:
   a. Asif Choudhury, M.D. – Gastroenterology, effective 03-13-18
   b. Esther Morrison, M.D. – Infectious Disease, effective 04-06-18

4. Leave of Absence:
   c. Michael Tibbetts, M.D. – Ophthalmology, 03-14-18 – 03-31-19

5. Privilege Request:
   a. Angela Echeverria, M.D. – TCAR privileges
   c. Arun Penukonda, M.D. – Class II Sedation

6. Change of Status:
   a. Stephen Zellner, M.D. – Infectious Disease, Honorary 06-01-18

7. First Year Completions – Active Status:
   a. Jean Hage, M.D. – Infectious Disease

8. First Year Completion – Associate Status:
   a. Bradley Castellano, D.P.M. – Podiatry
9. Allied Health Practitioners:
   a. **Ruth Milien Jonathas, ARNP** – Allergy, Sleep & Lung Care
   b. **Alex Lagodzinski, ARNP** – LPG Prenal Transplant
   c. **Julissa Taveras, ARNP** – Florida Cancer Specialists
   d. **San Wong, ARNP** – LPG Lee Neurosurgery

10. Allied Health Practitioners – Sponsor Change:
    a. **Lisa Jaycox, ARNP** – Millennium Hospitalist Group
    b. **Kenneth Miller, PA** – Gulf Shore Internal Medicine

11. Allied Health Practitioner – Additional Sponsor:
    a. **Denise Schoonover, ARNP** – Millennium Hospitalist Group

12. Allied Health Practitioner – Privilege Request:
    a. **Alexander Iriarte, PA** – LPG Pulmonary Associates, Central Venous Catheters
    b. **Jill Jurkiewicz, ARNP** – LPG Hospitalist Group, Code Blue and Order Controlled Substances

   Approved by the Board of Directors – April 26, 2018

   ________________________________________________________________
   Stephen R. Brown, M.D., Chairman - Board of Directors
To: Board of Directors

From: Nancy A. Taylor, CPMSM, CPCS
Director, Centralized Credentialing Services

Date: April 18, 2018

Subject: HealthPark Medical Center Medical Staff Recommendations

The Facility Medical Executive Committee of the Medical Staff recommends the following physicians and allied health practitioners and certifies they have met the requirements set forth in the bylaws:

1. Associate Staff Appointment:
   a. Thomas Hughes, D.O. – Cardiology
   b. Venkat Prasad, M.D. – Family Medicine
   c. Alyson Sanchious, M.D. – Family Medicine

2. Telemedicine Appointment – Privileges Only:
   a. Fernando Norona, M.D. – Teleneurology
   b. Theresa Sevilis, D.O. - Teleneurology

3. Reinstatement:
   a. Ovidiu Ranta, M.D. – Internal Medicine

4. Intrasystem Application:
   a. Peter Ameglio, M.D. – Orthopedic Surgery

5. Resignations:
   a. Asif Choudhury, M.D. – Gastroenterology, effective 03-13-18
   b. Esther Morrison, M.D. – Infectious Disease, effective 04-06-18

6. Leave of Absence:
   a. Meir Daller, M.D. – Urology, return from leave effective 05-01-18
   b. Eileen de Grandis, M.D. – General & Vascular Surgery, 04-01-18 – 03-31-19
   d. Michael Tibbetts, M.D. – Ophthalmology, 03-14-18 – 03-31-19

7. Privilege Request:
   a. Gilbert Abou-Lahoud, M.D. – Advanced General Surgery Robotic Surgery
   b. Angela Echeverria, M.D. – TCAR privileges
   d. Arun Penukonda, M.D. – Class II Sedation

8. Change of Status:
   a. Thomas Carrasquillo, M.D. – General & Vascular Surgery, Honorary 05-14-18
   b. Stephen Zellner, M.D. – Infectious Disease, Honorary 06-01-18
9. First Year Completions – Active Status:
   a. Khalid Alam, M.D. - Gastroenterology
   b. Muhammad Shahid, M.D. – Internal Medicine

10. First Year Completion – Associate Status:
    a. Jean Hage, M.D. – Infectious Disease

11. Allied Health Practitioners:
    a. Esma Etan, CRNA – US Anesthesia Partners
    b. Alex Lagodzinski, ARNP – LPG Prenal Transplant
    c. Julissa Taveras, ARNP – Florida Cancer Specialists
    d. San Wong, ARNP – LPG Lee Neurosurgery

12. Allied Health Practitioners – Sponsor Change:
    a. Mary Hoke, ARNP – LPG Sleep Medicine
    b. Lisa Jaycox, ARNP – Millennium Hospitalist Group

13. Allied Health Practitioner – Intrasystem/Additional Sponsor:
    a. Denise Schoonover, ARNP – Millennium Hospitalist Group

14. Allied Health Practitioner – Privilege Request:
    a. Jill Jurkiewicz, ARNP – LPG Hospitalist Group, Code Blue and Order
       Controlled Substances

Approved by the Board of Directors – April 26, 2018

Stephen R. Brown, M.D., Chairman - Board of Directors
MEMORANDUM

To: Board of Directors

From: Nancy A. Taylor, CPMSM, CPCS
Director, Centralized Credentialing Services

Date: April 18, 2018

Subject: Golisano Children’s Hospital of Southwest Florida Medical Staff Recommendations

The Facility Medical Executive Committee of the Medical Staff recommends the following physicians and allied health practitioners and certifies they have met the requirements set forth in the bylaws:

1. Telemedicine Appointment – Privileges Only:
   a. Carolyn Carey, M.D. – Tele-Neurosurgery
   b. George Jallo, M.D. – Tele-Neurosurgery
   c. Gerald Tuite, Jr., M.D. – Tele-Neurosurgery
   d. Luis Rodriguez, M.D. – Tele-Neurosurgery

2. First Year Completions – Active Status:
   a. Jordan Hester, D.M.D. – Pediatric Dentistry

3. Allied Health Practitioner:
   a. Esma Etan, CRNA – US Anesthesia Partners

4. Allied Health Practitioner – Intrasystem/Sponsor Change:
   a. Mary Hoke, ARNP – LPG Sleep Medicine

Approved by the Board of Directors – April 26, 2018

______________________________
Stephen R. Brown, M.D., Chairman - Board of Directors
1. Amendment to CEO’s Employment Agreement.
DATE: April 26, 2018

LEGAL SERVICE REVIEW? YES:X NO:

SUBJECT: Proposed Amendment to President and CEO (“CEO”) Employment Agreement

REQUESTOR & TITLE: Board Counsel, Jim Humphrey, Esq.; Mary McGillicuddy, Chief Legal Officer

PREVIOUS BOARD ACTION ON THIS ITEM (IF ANY)
(justification and/or background for recommendations – internal groups which support the recommendation)

On May 18, 2017, the Board approved an Employment Agreement for Dr. Larry Antonucci, President and CEO, effective from June 1, 2017 until May 31, 2021.

SPECIFIC PROPOSED MOTIONS:

1) Motion to approve the proposed Amendment to the CEO’s Employment Agreement as presented which extends the term of the Agreement from May 31, 2021 to September 30, 2021, and to authorize, upon final legal review and approval, the Chairman of the Board for LMHS to execute the Amendment to the CEO’s Employment Agreement.

2) Motion to amend Board Policy no. 40.02I to reflect the Board’s action amending the term of the CEO’s Employment Agreement to align with the health system’s fiscal year.

FINANCIAL IMPLICATIONS
Budgeted Account X Non-Budgeted
(Annual Project Budget and Total Project Budget)

STAFFING & OPERATIONAL IMPLICATIONS

The proposed motions will align the CEO’s performance metrics, designed to drive the achievement of the health system’s strategic goals and to enhance organizational performance, with the health system’s performance goals.

PURPOSE/REASON FOR RECOMMENDATION

The Board expressed the desire to align the CEO’s performance metrics with the timing of the health system’s strategic goals and requested that the option to amend the CEO’s Employment Agreement be presented for its consideration.

SUMMARY
(including alternatives considered, Pros and Cons)

The Board may accept or reject the proposed amendment to the CEO’s Employment Agreement and revision to Board Policy 40.02I. If the Board approves the Amendment, the CEO’s performance metrics designed to drive the achievement of the health system’s strategic goals and to enhance organizational performance will align with the timing of the health system’s performance goals. If the Board rejects the Amendment, the CEO’s performance metrics will be reviewed four months prior to the close of the health system’s fiscal year as contemplated under the current Employment Agreement.

If the Board approves the Amendment to the CEO’s Employment Agreement, Board Policy 40.02I is revised to reflect the Amendment as presented.
AMENDMENT TO
EMPLOYMENT AGREEMENT
LAWRENCE ANTONUCCI, M.D.
PRESIDENT AND CHIEF EXECUTIVE OFFICER

THIS AMENDMENT, made effective as of April 26, 2018 (the “Effective Date”), by and between the Lee Memorial Health System d/b/a Lee Health (“System”), a special-purpose unit of local government created pursuant to Chapter 63-1552, Laws of Florida Special Acts 1963, as recodified by Chapter 2000-439, Laws of Florida Special Acts 2000 (“Enabling Act”), and Lawrence Antonucci, M.D. (“Employee”) (referred to collectively herein as “the Parties”), is incorporated by reference into the Agreement between the Parties effective June 1, 2017 (“Original Agreement”). The Original Agreement and this Amendment shall be collectively referred to as the “Employment Agreement.” The Parties agree as follows:

1. Except as amended and modified herein, the Original Agreement shall remain in full force and effect, and the Original Agreement and this Amendment shall be read and interpreted as a single document, the Employment Agreement.

2. Section 3, “Term of Agreement” is amended to read as follows:

   The term of this Agreement shall begin on June 1, 2017 (the “Effective Date”), and shall continue thereafter until September 30, 2021. Within sixty (60) days of October 1, 2020, the Board and Employee agree to commence negotiating the renewal of this Agreement or the terms of a new Agreement. If a decision is made not to renew or to enter into a new Agreement, then in such event this Agreement and all of its terms and conditions shall continue in effect until the end of the term.

IN WITNESS WHEREOF, the Parties have executed this Amendment as of this ____ day of ______________, 2018.

EMPLOYER: LEE MEMORIAL HEALTH SYSTEM

By: ___________________________________
    Stephen R. Brown, M.D.
    Chair, Board of Directors

EMPLOYEE: LAWRENCE ANTONUCCI

_____________________________________
    Lawrence Antonucci
PURPOSE:

To provide for the establishment of the compensation of the President/CEO of the Lee Memorial Health System and for an annual review of his or her performance.

POLICY:

1. In establishing the compensation of the President/CEO:

   a. The Board approved a market competitive total cash compensation package, as set forth in the President/CEO’s written contract, the provisions of which control if in conflict with this Policy.

   b. The President/CEO’s total cash compensation package in the written contract consists of the following components:

      1. Base pay compensation that, commencing in the 2nd year of the written contract, is no less than the 50th percentile of median base pay compensation for chief executive officers of health care systems of similar size as reported by nationally recognized compensation consultants and based upon national survey data of health care executive salaries and compensation. The survey data will provide for a geographic weight equal to the following: national data (1/3 weight), statewide data (1/3 weight) and southeastern United States (1/3 weight).

      2. An annual Short Term Incentive Plan opportunity commencing June 1 in each year of the written contract, the terms of which will be reviewed and approved by the Board annually and will set a Total Annual Incentive Pay Target of up to 30% of the President/CEO’s base compensation for each year of the Plan.
3. A Long Term Incentive Plan opportunity in years two, three and four of the written contract, the terms of which will be reviewed and approved by the Board and will set a Total Long Term Incentive Pay Target of up to 15% of the President/CEO’s base compensation for each year of the Plan. The Long Term Incentive Plan opportunity will commence on June-October 1, 2018, for a potential pay out following at the conclusion of fiscal year 4-2021 of the written contract.

2. Annually, the Board shall review/develop and approve a set of written performance expectations. The comments of the President/CEO shall be taken into consideration in the development of his or her respective expectations, but the Board shall have the final decision with regard to the performance expectations.

3. The Board shall, as appropriate, periodically review/revise and approve a written job description for the President/CEO.

4. Annually, the Board shall conduct a performance evaluation of the President/CEO. The President/CEO’s performance will be measured from June-October 1 through May-September 34-30 each year using the written performance expectations approved by the Board. The Chairman of the Board shall have the responsibility to request Human Resources compile any factual or statistical information necessary to determining outcomes with particular performance expectations. Human Resources will combine the evaluations into one document, reflecting the rating data and documents.

5. The Board shall meet with the President/CEO, discuss the results of the Board’s evaluations and provide the President/CEO with any additional feedback on his/her annual performance. At the conclusion of such meetings, the Board shall accept the President/CEO’s evaluation and determine any changes to the President/CEO’s job description or performance evaluation document for the next fiscal year.

6. The President/CEO’s base pay compensation shall be adjusted annually on June 1 to comply with the terms of his or her contract.
PURPOSE:

To provide for the establishment of the compensation of the President/CEO of the Lee Memorial Health System and for an annual review of his or her performance.

POLICY:

1. In establishing the compensation of the President/CEO:
   
   a. The Board approved a market competitive total cash compensation package, as set forth in the President/CEO’s written contract, the provisions of which control if in conflict with this Policy.

   b. The President/CEO’s total cash compensation package in the written contract consists of the following components:

      1. Base pay compensation that, commencing in the 2nd year of the written contract, is no less than the 50th percentile of median base pay compensation for chief executive officers of health care systems of similar size as reported by nationally recognized compensation consultants and based upon national survey data of health care executive salaries and compensation. The survey data will provide for a geographic weight equal to the following: national data (1/3 weight), statewide data (1/3 weight) and southeastern United States (1/3 weight).

      2. An annual Short Term Incentive Plan opportunity commencing October 1 in each year of the written contract, the terms of which will be reviewed and approved by the Board annually and will set a Total Annual Incentive Pay Target of up to 30% of the President/CEO’s base compensation for each year of the Plan.
3. A Long Term Incentive Plan opportunity in years two, three and four of the written contract, the terms of which will be reviewed and approved by the Board and will set a Total Long Term Incentive Pay Target of up to 15% of the President/CEO’s base compensation for each year of the Plan. The Long Term Incentive Plan opportunity will commence on October 1, 2018, for a potential pay out following the conclusion of fiscal year 2021.

2. Annually, the Board shall review/develop and approve a set of written performance expectations. The comments of the President/CEO shall be taken into consideration in the development of his or her respective expectations, but the Board shall have the final decision with regard to the performance expectations.

3. The Board shall, as appropriate, periodically review/revise and approve a written job description for the President/CEO.

4. Annually, the Board shall conduct a performance evaluation of the President/CEO. The President/CEO’s performance will be measured from October 1 through September 30 each year using the written performance expectations approved by the Board. The Chairman of the Board shall have the responsibility to request Human Resources compile any factual or statistical information necessary to determining outcomes with particular performance expectations. Human Resources will combine the evaluations into one document, reflecting the rating data and documents.

5. The Board shall meet with the President/CEO, discuss the results of the Board’s evaluations and provide the President/CEO with any additional feedback on his/her annual performance. At the conclusion of such meetings, the Board shall accept the President/CEO’s evaluation and determine any changes to the President/CEO’s job description or performance evaluation document for the next fiscal year.

6. The President/CEO’s base pay compensation shall be adjusted annually on June 1 to comply with the terms of his or her contract.
BOARD OF DIRECTORS

NEW BUSINESS

Lee Memorial Health System Board of Directors
Summary of Board Meeting Effectiveness Dashboard  
April 12, 2018

The Board Meeting Effectiveness Dashboard as completed by Board members at the meeting. The following information was taken from the Dashboard forms and shared with all Board members at the meeting.

<table>
<thead>
<tr>
<th>Process Measure</th>
<th>Red</th>
<th>Yellow</th>
<th>Green</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Effective Use of meeting time</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>2. Pre-Meeting Materials distributed on time</td>
<td></td>
<td></td>
<td>6</td>
</tr>
<tr>
<td>3. Board Members stay on track</td>
<td></td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>4. Presentation at Right level of detail</td>
<td>2</td>
<td></td>
<td>4</td>
</tr>
<tr>
<td>5. Effective Decision making process</td>
<td></td>
<td></td>
<td>6</td>
</tr>
<tr>
<td>6. Meeting Ends in Timely manner</td>
<td>3</td>
<td>3</td>
<td></td>
</tr>
</tbody>
</table>

**What Needs Improvement (by Process Measure)**

1. **Effective Use of Meeting Time**  
   Need less presenters at one time. More discussion can be done

2. **Pre-Meeting Materials Distributed on Time**  
   Agenda does not match slides

4. **Presentations at Right Level of Detail**  
   Length of speakers (some) pt. experience too long

**Suggestions for Improvement or Observations (by Process Measure)**

1. **Effective Use of Meeting Time**  
   PLC great dialog increased board interaction is valuable to Board  
   Too long

6. **Meeting Ends in Timely Manner**  
   2 board members left before adjournment

Next steps for improvement will be discussed at a future Board meeting.
BOARD OF DIRECTORS

DATE OF THE NEXT REGULARLY SCHEDULED MEETING:

WORKSHOP

Thursday, May 3, 2018
1:00 p.m.

Gulf Coast Medical Center
Boardroom, Suite 190
13685 Doctors Way
Fort Myers, FL 33912

Lee Memorial Health System Board of Directors